

# IMPROVING LEARNING THROUGH CLASSROOM ASSESSMENT

**Dates:** June 29-July 3, 2009

**Location:** UVU, Heber Campus

**Credit:** USOE or 3 SUU semester hours

**Instructors:** Hugh Baird, Lorien Francis, Barbara Gentry, Beth Hoburg, Kevin King and Janis Taylor

**Instructor Contact Information:**

Lorien Francis      (801) 377-5160      [lorien@guyfrancis.com](mailto:lorien@guyfrancis.com)

**Registration Fee and Deposit:**

\$275 registration fee; \$45 deposit payable to SUU

**Send registration form and deposit to:**

Lorien Francis  
1584 W. 1170 N.  
Provo, UT 84604



**Registration Contact Information:**

Lorien Francis      (801) 377-5160      [lorien@guyfrancis.com](mailto:lorien@guyfrancis.com)

**Course Description:**

Assessing students' learning formatively has been shown to be the most effective thing teachers can do to improve student learning (Black & Wiliam, 1998).

This course is a revision of the class we offered last summer. Each teacher completing the class will receive a **\$200 stipend**. The class is designed to help elementary and secondary science teachers improve their ability to construct dependable procedures for collecting evidence of what students have and have not learned, and to make valid, defensible judgments of student progress. In addition to improving their ability to plan and develop traditional paper-and-pencil tests, participants will gain experience in using performance assessments. The course emphasizes the need (1) to assess higher-order thinking as well as mastery of basic knowledge, (2) to help teachers find students' misconceptions about science content, and (3) to more closely integrate assessment with instruction, and (4) to align classroom instruction and assessment with the Utah Science Core Curriculum.

**All course communication will be made thru the email address provided on your registration form.** (Please provide an out of school summer contact for much of the correspondence may occur during the summer prior to the beginning of the course.)



# 2009 Science Professional Development Registration Form

*(Duplicate as Necessary)*

**Mail to:**

**Workshop Contact:**

Workshop Title	Date	Location	Registration Fee

**Contact Information:**

Teacher: \_\_\_\_\_  
District: \_\_\_\_\_  
School: \_\_\_\_\_  
Grade Level/Subject: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home phone: \_\_\_\_\_  
School phone: \_\_\_\_\_  
CACTUS # : \_\_\_\_\_  
E-mail: \_\_\_\_\_

**Commitment to Attend & District Approval:**

I understand that I am committing to this workshop and I will cancel at least two weeks prior to the workshop if I am unable to attend.

Teacher Signature: \_\_\_\_\_

Signature of Principal or District Representative indicates source of registration payment for workshop:

☐ **PERSONAL** Check # \_\_\_\_\_ enclosed **OR**

☐ **SCHOOL** \_\_\_\_\_ **OR**  
Principal

☐ **DISTRICT** \_\_\_\_\_  
District Representative

*\*Please contact your school or district to determine if approval is needed prior to registration.*

☐ Bill to This Address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Return this completed registration form and your refundable deposit check to the above listed workshop contact.*

**A separate registration form must be submitted for each workshop you plan to attend.**